

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT****FORM C/OH
COVER SHEET PG 1**

The C/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT #
(Ethics Commission filers)
00000001**2 PAGE #**
1 of 46**3 CANDIDATE /
OFFICEHOLDER
NAME**MS / MRS / MR
Mr.FIRST
Amadeo

MI

NICKNAME

LAST
Ortiz

SUFFIX

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

Receipt # Amount

Date Processed

Date Imaged

**4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS**

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

1443 W. Elsmere
San Antonio, TX 78201☐ Change of Address**5 CAMPAIGN
TREASURER
NAME**MS / MRS / MR
Mr.FIRST
Robert

MI

NICKNAME
BobLAST
Lott

SUFFIX

**6 CAMPAIGN
TREASURER
ADDRESS**
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

5045 Ayrshire Dr
San Antonio, TX 78217**7 CAMPAIGN
TREASURER
PHONE**

AREA CODE PHONE NUMBER EXTENSION

(210) 414-9966

8 REPORT TYPE☐

January 15

☐

30th day before election

☐

Runoff

☐15th day after campaign treasurer
appointment (officeholder only)☒

July 15

☐

8th day before election

☐

Exceeded \$500 limit

☐

Final report (Attach C/OH - FR)

**9 PERIOD
COVERED**

Month Day Year Month Day Year

03/30/2008

THROUGH

06/30/2008

10 ELECTIONELECTION DATE
Month Day Year

11/04/2008

ELECTION TYPE

☐

Primary

☐

Runoff

☒

General

☐

Special

11 OFFICE

OFFICE HELD (if any)

12 OFFICE SOUGHT (if known)
Bexar County Sheriff**13 NOTICE
OF DIRECT
CAMPAIGN
EXPENDITURE
BY OTHER
INDIVIDUALS**... Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval.
Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ...

Name

Address/PO Box; Apt. / Suite #; City; State; Zip Code

☐ additional pages**GO TO PAGE 2**

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS****FORM C/OH
COVER SHEET PG 2****14 C/OH NAME** Ortiz, Amadeo (Mr.)**15 ACCOUNT #** (Ethics Commission filers)
00000001**16 NOTICE
FROM
POLITICAL
COMMITTEE(S)**

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE**COMMITTEE NAME**☐ **GENERAL****COMMITTEE ADDRESS**☐ **SPECIFIC****COMMITTEE CAMPAIGN TREASURER NAME**☐ additional pages**COMMITTEE CAMPAIGN TREASURER ADDRESS****17 CONTRIBUTION
TOTALS**1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

0.00

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$

26,076.78

**EXPENDITURE
TOTALS**

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$

0.00

4. TOTAL POLITICAL EXPENDITURES

\$

29,867.22

**CONTRIBUTION
BALANCE**5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE
LAST DAY OF THE REPORTING PERIOD

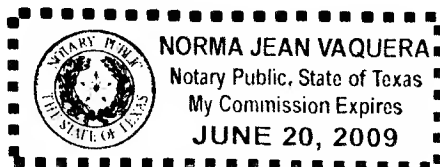
\$

687.98

**OUTSTANDING
LOAN TOTALS**6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$

3,000.00

18 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Amadeo Ortiz, this the 22 day
of May, 20 09, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Print name of officer administering oath

Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/18 Report: 3/46

2 FILER NAME Ortiz, Amadeo (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date

06/19/2008

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Ali, Akber

6 Contributor address; City; State; Zip Code
2234 Opal Creek
San Antonio, TX 78232

7 Amount of
contribution (\$)

\$2,000.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

04/01/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Alvarado, Anthony

Contributor address; City; State; Zip Code
7855 Hill Ridge
San Antonio, TX 78250

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/23/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Byars, Eldon

Contributor address; City; State; Zip Code
14407 Briarfern St.
San Antonio, TX 78247

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Cardiel, Edward

Contributor address; City; State; Zip Code
1500 S. Zazamora
San Antonio, TX 78207

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/23/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Casillas, Dennis

Contributor address; City; State; Zip Code
8634 Quail Whisper
San Antonio, TX 78250

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/18 Report: 4/46

2 FILER NAME Ortiz, Amadeo (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date

05/02/2008

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Catalani, Dan

6 Contributor address; City; State; Zip Code
1500 S. Zarmazora
San Antonio, TX 78207

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Catalani, Steven

05/02/2008

Contributor address; City; State; Zip Code
1500 S. Zazamora
San Antonio, TX 78207

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Christian, David

04/01/2008

Contributor address; City; State; Zip Code
310 S. St.Mary's
San Antonio, TX 78205

Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Davis, Cedillo & Mendoza

04/01/2008

Contributor address; City; State; Zip Code
755 E. Mulberry Ave.
San Antonio, TX 78212

Amount of
contribution (\$)

\$750.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Deputy Sheriffs Association of Bex Co PAC

05/02/2008

Contributor address; City; State; Zip Code
816 Camaron #214
San Antonio, TX 78212

Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 3/18 Report: 5/46	
2 FILER NAME Ortiz, Amadeo (Mr.)				3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 04/01/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dupont, Charles		7 Amount of contribution (\$) \$125.00	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code P.O. Box 47124 San Antonio, TX 78265			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date 04/01/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Esponiza, William		Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 8230 Misty Willow San Antonio, TX 78250			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 03/31/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Estrada, Louie		Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 11535 Creek Bow San Antonio, TX 78253			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 04/01/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fletcher, Roy		Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 11843 Braesview #601 San Antonio, TX 78213			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 04/01/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Flores, Charles		Amount of contribution (\$) \$55.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 8230 Misty Willow San Antonio, TX 78250			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 4/18 Report: 6/46

2 FILER NAME Ortiz, Amadeo (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

04/01/2008

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Freedom Debt.com

6 Contributor address; City; State; Zip Code
4100 E. Piedras Dr.
Suite 251
San Antonio, TX 78228

7 Amount of
contribution (\$)

\$1,000.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

06/30/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Gabehart, Daniel

Contributor address; City; State; Zip Code
306 Bloomfield Dr
San Antonio, TX 78228

Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/01/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
George Primera Trucking

Contributor address; City; State; Zip Code
2050 Oakland Bend
San Antonio, TX 78258

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/30/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Gholson, William & Carolina

Contributor address; City; State; Zip Code
8181 Tezel Rd
San Antonio, TX 78250

Amount of
contribution (\$)

\$620.70

In-kind contribution
description (if applicable)
F & B - Meet & Greet

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/30/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Gholson, William & Carolina

Contributor address; City; State; Zip Code
8181 Tezel Rd
San Antonio, TX 78250

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)
Campaign Marketing

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 5/18 Report: 7/46

2 FILER NAME Ortiz, Amadeo (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date

04/01/2008

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Gonzales, Roberto

6 Contributor address; City; State; Zip Code
1247 Fawn Gate
San Antonio, TX 78248

7 Amount of
contribution (\$) \$500.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

05/02/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Gossen, Steve

Contributor address; City; State; Zip Code
1500 S. Zarzamora
San Antonio, TX 78207

Amount of
contribution (\$) \$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/01/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Guerra, Johnny

Contributor address; City; State; Zip Code
5107 Queens Bee Ct.
San Antonio, TX 78228

Amount of
contribution (\$) \$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/19/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Guerrero, Jay

Contributor address; City; State; Zip Code
132 Twin Leaf
San Antonio, TX 78232

Amount of
contribution (\$) \$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/03/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hayes, Homer III

Contributor address; City; State; Zip Code
2802 Colonial Dr.
Dickinson, TX 77539

Amount of
contribution (\$) \$130.90

In-kind contribution
description (if applicable)
Campaign Marketing

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/18 Report: 8/46	
2 FILER NAME Ortiz, Amadeo (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 05/02/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hight, Henry 6 Contributor address; City; State; Zip Code 9214 Cedar Point Helotes, TX 78258	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 04/01/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hominick Custom Builders Contributor address; City; State; Zip Code 19455 Nottingham Ln. Helotes, TX 78023	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/02/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Leon, Jack Contributor address; City; State; Zip Code 500 Lexington San Antonio, TX 78215	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 04/05/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Luciano Restaurant on the River Contributor address; City; State; Zip Code 849 E. Commerce # 183 San Antonio, TX 78205	Amount of contribution (\$) \$36.86	In-kind contribution description (if applicable) F & B Meeting (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/23/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Luckey, Lawrence Contributor address; City; State; Zip Code 13902 Winding Hill Dr San Antonio, TX 78217	Amount of contribution (\$) \$40.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 7/18 Report: 9/46

2 FILER NAME Ortiz, Amadeo (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

03/31/2008

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Martin, Richard

6 Contributor address; City; State; Zip Code
8914 Las Sonora Rio
Helotes, TX 78023

7 Amount of
contribution (\$)

\$225.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

06/19/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
McCombs, B.J.

Contributor address; City; State; Zip Code
P.O. Box BH003
San Antonio, TX 78201

Amount of
contribution (\$)

\$2,500.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/01/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
McFall, Breitbeil & Shults

Contributor address; City; State; Zip Code
1331 Lamar Street
Houston, TX 77010

Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Miranda, Thomas

Contributor address; City; State; Zip Code
4604 Tamarack Trail
Austin, TX 78727

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/01/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Moltavo, David

Contributor address; City; State; Zip Code
387 Meredith
Apt. 2
San Antonio, TX 78228

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 8/18 Report: 10/46

2 FILER NAME Ortiz, Amadeo (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

04/01/2008

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Morales, Richard

6 Contributor address; City; State; Zip Code
3617 Saratoga Pl.
Schertz, TX 78154

7 Amount of
contribution (\$)

\$250.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

04/01/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Morales, Richard

Contributor address; City; State; Zip Code
3617 Saratoga Pl.
Schertz, TX 78154

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/01/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ninam, Mathews

Contributor address; City; State; Zip Code
1803 Ravenscroft Dr.
San Antonio, TX 78253

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Otero, R. E.

Contributor address; City; State; Zip Code
3218 Thousand Oaks
San Antonio, TX 78247

Amount of
contribution (\$)

\$1,000.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/01/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Pacheco, Frank

Contributor address; City; State; Zip Code
1610 W. Hildebrand Ave
San Antonio, TX 78201

Amount of
contribution (\$)

\$300.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 9/18 Report: 11/46

2 FILER NAME Ortiz, Amadeo (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

04/01/2008

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Perez, Maria6 Contributor address; City; State; Zip Code
3809 Songbird Ln.
San Antonio, TX 782297 Amount of
contribution (\$)

\$500.00

8 In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

03/30/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Plaza ClubContributor address; City; State; Zip Code
Frost Tower Bank - 21st Floor
San Antonio, TX 78207Amount of
contribution (\$)

\$69.02

In-kind contribution
description (if applicable)
Refund(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/31/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Quesada, HectorContributor address; City; State; Zip Code
13663 In Wood Rk.
San Antonio, TX 78216Amount of
contribution (\$)

\$125.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/01/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Rainwater, JamesContributor address; City; State; Zip Code
122 E. Terra Alta Dr.
San Antonio, TX 78209Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/01/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ray, RobertContributor address; City; State; Zip Code
11700 Tall Tree St.
San Antonio, TX 78230Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 10/18 Report: 12/46

2 FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

04/01/2008

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Rivera, Mary Ann**6** Contributor address; City; State; Zip Code
950 Riverstone
San Antonio, TX 78258**7** Amount of
contribution (\$)

\$50.00

8 In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐**9** Principal occupation / Job title (See Instructions)**10** Employer (See Instructions)

Date

05/02/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Rodriguez, RudiContributor address; City; State; Zip Code
10000 W. Commerce St.
San Antonio, TX 78227Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/01/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Rodriguez, AlvaradoContributor address; City; State; Zip Code
5830 Cliffmont
San Antonio, TX 78250Amount of
contribution (\$)

\$40.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/01/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Rodriguez, RudyContributor address; City; State; Zip Code
4310 Little Ln.
San Antonio, TX 78229Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/01/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Roig, AlexContributor address; City; State; Zip Code
3003 N.W. Loop 410
Suite 201
San Antonio, TX 78230Amount of
contribution (\$)

\$40.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 11/18 Report: 13/46

2 FILER NAME Ortiz, Amadeo (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

05/23/2008

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Salyer, Steven

6 Contributor address; City; State; Zip Code

13507 Demeter
Universal City, TX 781487 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

05/02/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)

Samuel, George

Contributor address; City; State; Zip Code

27975 Smithson Valley Rd.
San Antonio, TX 78261Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/01/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)

San Antonio Chapter of HAPCOA

Contributor address; City; State; Zip Code

P.O. BOX 831544
San Antonio, TX 78283Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/01/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)

San Antonio Police Officer's Association (PAC)

Contributor address; City; State; Zip Code

1939 N.E. Loop 410 Suite 300
San Antonio, TX 78217Amount of
contribution (\$)

\$1,000.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/10/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)

San Antonio Produce Market

Contributor address; City; State; Zip Code

1500 S. Zarzamora
San Antonio, TX 78207Amount of
contribution (\$)

\$353.10

In-kind contribution
description (if applicable)
April Rent(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 12/18 Report: 14/46**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

05/01/2008**5** Full name of contributor ☐ out-of-state PAC (ID# _____)
San Antonio Produce Market**6** Contributor address; City; State; Zip Code
1500 S. Zarzamora
San Antonio, TX 78207**7** Amount of
contribution (\$)

\$353.10**8** In-kind contribution
description (if applicable)
May Rent(If travel outside of Texas, complete Schedule T) ☐**9** Principal occupation / Job title (See Instructions)**10** Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
San Antonio Produce Market

06/01/2008

Contributor address; City; State; Zip Code
1500 S. Zarzamora
San Antonio, TX 78207Amount of
contribution (\$)

\$353.10In-kind contribution
description (if applicable)
June Rent(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
San Antonio Professional Firefighter's Assc. (PAC)

04/01/2008

Contributor address; City; State; Zip Code
P.O. Box 5100
San Antonio, TX 78201Amount of
contribution (\$)

\$790.00In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sanders, Darrell

05/02/2008

Contributor address; City; State; Zip Code
1503 Crescent Pl.
San Antonio, TX 78258Amount of
contribution (\$)

\$50.00In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Scardal, James

05/02/2008

Contributor address; City; State; Zip Code
4219 Glencrest Dr.
San Antonio, TX 78229Amount of
contribution (\$)

\$100.00In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 13/18 Report: 15/46

2 FILER NAME Ortiz, Amadeo (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

04/01/2008

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Segura, Arturo

6 Contributor address; City; State; Zip Code
2218 Bedford Stage
San Antonio, TX 78213

7 Amount of
contribution (\$)

\$225.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

05/02/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sepulveda, Frank

Contributor address; City; State; Zip Code
1500 S. Zarzamora
San Antonio, TX 78207

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/01/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Shattles, Chuck

Contributor address; City; State; Zip Code
926 Chulie Dr.
San Antonio, TX 78216

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/19/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Silva, Jennifer

Contributor address; City; State; Zip Code
223 Chelsea Dr.
San Antonio, TX 78213

Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/31/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Specia, Mike

Contributor address; City; State; Zip Code
5917 San Pedro
San Antonio, TX 78212

Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 14/18 Report: 16/46

2 FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)

00000001

4 Date

04/01/2008

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Spirt, Greg**6** Contributor address; City; State; Zip Code
106 Rustless Butte
Shavano Park, TX 78231**7** Amount of
contribution (\$)

\$1,000.00

8 In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐**9** Principal occupation / Job title (See Instructions)**10** Employer (See Instructions)

Date

04/01/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Stolhandske, TomContributor address; City; State; Zip Code
2531 Old Orchard Ln.
San Antonio, TX 78230Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Subramaniam, MuraliContributor address; City; State; Zip Code
11 San Isidro
San Antonio, TX 78261Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/31/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Swonke, Leon Jr.Contributor address; City; State; Zip Code
6715 Bandera Rd.
San Antonio, TX 78238Amount of
contribution (\$)

\$40.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/01/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Tomlin, W. R.Contributor address; City; State; Zip Code
P.O. Box 29023
San Antonio, TX 78229Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 15/18 Report: 17/46

2 FILER NAME Ortiz, Amadeo (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

05/02/2008

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Trainer, Michael

6 Contributor address; City; State; Zip Code
1249 Hillside Oaks Dr
La Vernia, TX 78121

7 Amount of
contribution (\$)

\$25.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

05/23/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Trainer, Michael

Contributor address; City; State; Zip Code
1249 Hillside Oaks Dr
La Vernia, TX 78121

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/19/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Trainer, Michael

Contributor address; City; State; Zip Code
1249 Hillside Oaks Dr
La Vernia, TX 78121

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/19/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Trainer, Michael

Contributor address; City; State; Zip Code
1249 Hillside Oaks Dr
La Vernia, TX 78121

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/01/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Trevino, Raymond

Contributor address; City; State; Zip Code
819 Ripley
San Antonio, TX 78212

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**The **INSTRUCTION GUIDE** explains how to complete this form.**1** PAGE #

Schedule: 16/18 Report: 18/46

2 FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

04/01/2008

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Vargas, Robert**6** Contributor address; City; State; Zip Code
800 Dolorosa
Suite 105
San Antonio, TX 78207**7** Amount of
contribution (\$)

\$500.00

8 In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐**9** Principal occupation / Job title (See Instructions)**10** Employer (See Instructions)

Date

04/01/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Villareal, Lee RoyContributor address; City; State; Zip Code
P.O. Box 767
Cibolo, TX 78108Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/01/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Walker, AveryContributor address; City; State; Zip Code
4103 Cliff Run
San Antonio, TX 78222-2731Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/30/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Walsh, BrianContributor address; City; State; Zip Code
632 Rittiman Rd
San Antonio, TX 78209Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/01/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Watking, PhilContributor address; City; State; Zip Code
926 Chulie Dr.
San Antonio, TX 78216Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 17/18 Report: 19/46

2 FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

03/31/2008

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Wheeler, Wyatt**6** Contributor address; City; State; Zip Code
6715 Bandera Rd.
San Antonio, TX 78238**7** Amount of
contribution (\$)

\$80.00

8 In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐**9** Principal occupation / Job title (See Instructions)**10** Employer (See Instructions)

Date

04/01/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Willborn, DavidContributor address; City; State; Zip Code
9310 Broadway
Bldg. 2 Suite 201
San Antonio, TX 78217Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/01/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Willborn, JamesContributor address; City; State; Zip Code
6514 Laurel Hill
San Antonio, TX 78229Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/01/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Willborn, JamesContributor address; City; State; Zip Code
6514 Laurel Hill
San Antonio, TX 78229Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/01/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Willborn-Murray, DawnContributor address; City; State; Zip Code
231 N. Adame St.
Westmont, IL 60559Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 18/18 Report: 20/46

2 FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

05/28/2008

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Wurzbach Estates**6** Contributor address; City; State; Zip Code
8543 Wurzbach Rd.
San Antonio, TX 78240**7** Amount of
contribution (\$)

\$400.00

8 In-kind contribution
description (if applicable)
Donated Security Fee(If travel outside of Texas, complete Schedule T) ☐**9** Principal occupation / Job title (See Instructions)**10** Employer (See Instructions)

Date

04/01/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Zarate, TaraContributor address; City; State; Zip Code
9270 Ridge Post
San Antonio, TX 78250Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/2008

Full name of contributor ☐ out-of-state PAC (ID# _____)
Zook, DonaldContributor address; City; State; Zip Code
2439 W. Summit Ave
San Antonio, TX 78228Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/25 Report: 21/46**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

06/25/2008**5** Payee name
Allied Ad Agency**6** Payee address; City; State; Zip Code
3700 Blanco Rd.
San Antonio, TX 78212**7** Amount
(\$)

\$2,500.00**8** Purpose of payment (See instructions regarding type of information required.)

Campaign Marketing

(If travel outside of Texas, complete Schedule T) ☐**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
AT & T Telephone

05/01/2008

Payee address; City; State; Zip Code
P.O. Box 930170
Dallas, TX 75393-0170Amount
(\$)

\$144.85

Purpose of payment (See instructions regarding type of information required.)

Office telephone & Internet

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
AT & T Telephone

05/19/2008

Payee address; City; State; Zip Code
P.O. Box 930170
Dallas, TX 75393-0170Amount
(\$)

\$261.50

Purpose of payment (See instructions regarding type of information required.)

Office telephone & Internet

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
AT & T Telephone

06/06/2008

Payee address; City; State; Zip Code
P.O. Box 930170
Dallas, TX 75393-0170Amount
(\$)

\$127.26

Purpose of payment (See instructions regarding type of information required.)

Office telephone & Internet

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 2/25 Report: 22/46**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

06/10/2008**5** Payee name
AT & T Telephone**6** Payee address; City; State; Zip Code
P.O. Box 930170
Dallas, TX 75393-0170**7** Amount
(\$)

\$260.14**8** Purpose of payment (See instructions regarding type of information required.)

Office telephone & Internet

(If travel outside of Texas, complete Schedule T) ☐**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

Date

Payee name
Best Buy

05/19/2008

Payee address; City; State; Zip Code
2301 Sw Military Dr
San Antonio, TX 78224Amount
(\$)

\$114.57

Purpose of payment (See instructions regarding type of information required.)

Computer Accessories

(If travel outside of Texas, complete Schedule T) ☐****** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

Date

Payee name
Best Buy

05/22/2008

Payee address; City; State; Zip Code
2301 Sw Military Dr
San Antonio, TX 78224Amount
(\$)

\$43.24

Purpose of payment (See instructions regarding type of information required.)

Computer Accessories

(If travel outside of Texas, complete Schedule T) ☐****** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

Date

Payee name
Bexar County Elections

05/29/2008

Payee address; City; State; Zip Code
203 W. Nueva
San Antonio, TX 78207Amount
(\$)

\$80.00

Purpose of payment (See instructions regarding type of information required.)

election data

(If travel outside of Texas, complete Schedule T) ☐****** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 3/25 Report: 23/46**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

05/27/2008**5** Payee name
City of SA - Parks & Recreation**6** Payee address; City; State; Zip Code
830 Castroville Rd
San Antonio, TX 78237**7** Amount
(\$)

\$270.00**8** Purpose of payment (See instructions regarding type of information required.)

Deposit -Rental Commanche Park #2

(If travel outside of Texas, complete Schedule T) ☐**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

04/04/2008

Payee name
De La O Gonzales, SylviaPayee address; City; State; Zip Code
763 Kirk Pl.
San Antonio, TX 78226Amount
(\$)

\$50.00

Purpose of payment (See instructions regarding type of information required.)

Poll Worker

(If travel outside of Texas, complete Schedule T) ☐**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:Office sought:
Office held:

Date

03/30/2008

Payee name
Digital EdgePayee address; City; State; Zip Code
3463 Magic Dr.
San Antonio, TX 78229Amount
(\$)

\$1,000.00

Purpose of payment (See instructions regarding type of information required.)

Marketing & Promotion

(If travel outside of Texas, complete Schedule T) ☐**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:Office sought:
Office held:

Date

03/31/2008

Payee name
Digital ExtremePayee address; City; State; Zip Code
12607 Prima Vista
San Antonio, TX 78233Amount
(\$)

\$262.00

Purpose of payment (See instructions regarding type of information required.)

Campaign Marketing

(If travel outside of Texas, complete Schedule T) ☐**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 4/25 Report: 24/46**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date**5** Payee name

Digital Extreme

7Amount
(\$)

04/01/2008

6 Payee address; City; State; Zip Code12607 Prima Vista
San Antonio, TX 78233

\$250.03

8 Purpose of payment (See instructions regarding type of information required.)

Campaign Marketing

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name

Dr. Don's Buttons, Badges & Magnets

Amount
(\$)

06/03/2008

Payee address; City; State; Zip Code

3906 W. Morrow Dr.
Glendale, AZ 85308

\$459.90

Purpose of payment (See instructions regarding type of information required.)

Campaign Marketing

****** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name

Duenas

Amount
(\$)

03/30/2008

Payee address; City; State; Zip Code

2023 Barney
San Antonio, TX 78237

\$100.00

Purpose of payment (See instructions regarding type of information required.)

Campaign Marketing - Mail out

****** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name

Easy Drive

Amount
(\$)

03/30/2008

Payee address; City; State; Zip Code

906 Ruiz St.
San Antonio, TX 78207

\$162.19

Purpose of payment (See instructions regarding type of information required.)

Campaign Marketing

****** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 5/25 Report: 25/46**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date**5** Payee name

El Solo Bistro

7 Amount
(\$)

06/27/2008

\$42.76

6 Payee address; City; State; Zip Code728 S. Presa
San Antonio, TX 78210**8** Purpose of payment (See instructions regarding type of information required.)

F & B Meeting

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name

Elections Services Inc.

Amount
(\$)

03/30/2008

\$5,011.16

Payee address; City; State; Zip Code

5309 McCullough
San Antonio, TX 78212

Purpose of payment (See instructions regarding type of information required.)

Campaign Marketing

**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name

Elections Services Inc.

Amount
(\$)

03/31/2008

\$3,600.00

Payee address; City; State; Zip Code

5309 McCullough
San Antonio, TX 78212

Purpose of payment (See instructions regarding type of information required.)

Campaign Marketing

**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name

Estella's Restaurant

Amount
(\$)

04/08/2008

\$26.21

Payee address; City; State; Zip Code

2200 W. Martin
San Antonio, TX 78207

Purpose of payment (See instructions regarding type of information required.)

F & B Meeting

**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 6/25 Report: 26/46**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

04/04/2008**5** Payee name
Exxon

6 Payee address; City; State; Zip Code
526 W. Cevallos
San Antonio, TX 78244**7** Amount
(\$)

\$66.21**8** Purpose of payment (See instructions regarding type of information required.)
Auto Expense**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name
ExxonAmount
(\$)

04/08/2008

Payee address; City; State; Zip Code
526 W. Cevallos
San Antonio, TX 78244

\$44.98

Purpose of payment (See instructions regarding type of information required.)

Auto Expense

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name
ExxonAmount
(\$)

04/08/2008

Payee address; City; State; Zip Code
526 W. Cevallos
San Antonio, TX 78244

\$68.98

Purpose of payment (See instructions regarding type of information required.)

Auto Expense

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name
Frances Carnot CampaignAmount
(\$)

06/23/2008

Payee address; City; State; Zip Code
P.O. Box 78265
San Antonio, TX 78278

\$60.00

Purpose of payment (See instructions regarding type of information required.)

Campaign Donation

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 7/25 Report: 27/46**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date**5** Payee name

Freddy's Restaurant

7Amount
(\$)

05/09/2008

6 Payee address; City; State; Zip Code1201 S. Flores
San Antonio, TX 78205

\$13.26

8 Purpose of payment (See instructions regarding type of information required.)

F & B - Meeting

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name

Freddy's Restaurant

Amount
(\$)

05/10/2008

Payee address; City; State; Zip Code

1201 S. Flores
San Antonio, TX 78205

\$40.00

Purpose of payment (See instructions regarding type of information required.)

F & B - Meeting

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name

Freddy's Restaurant

Amount
(\$)

05/21/2008

Payee address; City; State; Zip Code

1201 S. Flores
San Antonio, TX 78205

\$13.50

Purpose of payment (See instructions regarding type of information required.)

F & B - Meeting

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name

Frio Saloon

Amount
(\$)

05/08/2008

Payee address; City; State; Zip Code

801 S. Frio
San Antonio, TX 78207

\$16.25

Purpose of payment (See instructions regarding type of information required.)

F & B Meeting

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 8/25 Report: 28/46**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

04/04/2008**5** Payee name
Gallegos, Jose**6** Payee address; City; State; Zip Code
2047 W. Malone
San Antonio, TX 78225**7** Amount
(\$)

\$550.00**8** Purpose of payment (See instructions regarding type of information required.)
Working Election Polls(If travel outside of Texas, complete Schedule T) ☐**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
Gay Pride S.A.

06/26/2008

Payee address; City; State; Zip Code
P.O. Box 120185
San Antonio, TX 78212Amount
(\$)

\$50.00Purpose of payment (See instructions regarding type of information required.)
Campaign Marketing(If travel outside of Texas, complete Schedule T) ☐**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
Hancock Fabrics

06/16/2008

Payee address; City; State; Zip Code
7046 Bandera Rd.
San Antonio, TX 78238Amount
(\$)

\$338.89Purpose of payment (See instructions regarding type of information required.)
Supplies(If travel outside of Texas, complete Schedule T) ☐**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
HAPCOA

05/22/2008

Payee address; City; State; Zip Code
P.O. Box 831544
San Antonio, TX 78283Amount
(\$)

\$100.00Purpose of payment (See instructions regarding type of information required.)
Membership Dues 2008(If travel outside of Texas, complete Schedule T) ☐**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 9/25 Report: 29/46**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

04/08/2008**5** Payee name
HEB #36**6** Payee address; City; State; Zip Code
7004 S. Zarzamora
San Antonio, TX 78224**7** Amount
(\$)

\$8.62**8** Purpose of payment (See instructions regarding type of information required.)
F & B**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name
HEB #36Amount
(\$)

04/08/2008

Payee address; City; State; Zip Code
7004 S. Zarzamora
San Antonio, TX 78224

\$31.39

Purpose of payment (See instructions regarding type of information required.)
F & B** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name
HEB GroceryAmount
(\$)

03/30/2008

Payee address; City; State; Zip Code
2118 Fredericksburg Rd
San Antonio, TX 78201

\$43.35

Purpose of payment (See instructions regarding type of information required.)
F & B Fundraiser** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name
HEB GroceryAmount
(\$)

04/04/2008

Payee address; City; State; Zip Code
2118 Fredericksburg Rd
San Antonio, TX 78201

\$25.82

Purpose of payment (See instructions regarding type of information required.)
F & B Fundraiser** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 10/25 Report: 30/46**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

04/07/2008

5 Payee name
HEB Grocery**6** Payee address; City; State; Zip Code
2118 Fredericksburg Rd
San Antonio, TX 78201**7** Amount
(\$)

\$15.96

8 Purpose of payment (See instructions regarding type of information required.)

F & B Poll Workers

(If travel outside of Texas, complete Schedule T) ☐**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

04/08/2008

Payee name
HEB GroceryPayee address; City; State; Zip Code
2118 Fredericksburg Rd
San Antonio, TX 78201Amount
(\$)

\$6.90

Purpose of payment (See instructions regarding type of information required.)

F & B

(If travel outside of Texas, complete Schedule T) ☐**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:Office sought:
Office held:

Date

04/10/2008

Payee name
Herrera, RichardPayee address; City; State; Zip Code
151 Knoll
San Antonio, TX 78227Amount
(\$)

\$290.00

Purpose of payment (See instructions regarding type of information required.)

Labor

(If travel outside of Texas, complete Schedule T) ☐**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:Office sought:
Office held:

Date

04/08/2008

Payee name
Hobby LobbyPayee address; City; State; Zip Code
4522 Fredericksburg Rd.
San Antonio, TX 78201Amount
(\$)

\$15.54

Purpose of payment (See instructions regarding type of information required.)

Supplies

(If travel outside of Texas, complete Schedule T) ☐**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 11/25 Report: 31/46**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

05/08/2008**5** Payee name
Home Depot**6** Payee address; City; State; Zip Code
435 Sunset
San Antonio, TX 78209**7** Amount
(\$)

\$24.17**8** Purpose of payment (See instructions regarding type of information required.)
Office Supplies**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name
Ideas Unlimited

05/10/2008

Payee address; City; State; Zip Code
5213 Bandera Rd
San Antonio, TX 78238Amount
(\$)

\$863.04Purpose of payment (See instructions regarding type of information required.)
Campaign Signs / T-Shirt Printing**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name
Jim's Restaurant #3

04/07/2008

Payee address; City; State; Zip Code
3319 Hillcrest
San Antonio, TX 78201Amount
(\$)

\$25.64Purpose of payment (See instructions regarding type of information required.)
F&B - Bus. Meeting**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name
Jim's Restaurant #3

06/26/2008

Payee address; City; State; Zip Code
3319 Hillcrest
San Antonio, TX 78201Amount
(\$)

\$41.93Purpose of payment (See instructions regarding type of information required.)
F & B Meeting**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 12/25 Report: 32/46**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

06/29/2008

5 Payee name

Jim's Restaurant #3

7 Amount
(\$)

\$38.15

6 Payee address; City; State; Zip Code3319 Hillcrest
San Antonio, TX 78201**8** Purpose of payment (See instructions regarding type of information required.)

F & B Meeting

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

06/25/2008

Payee name

Justice Catherine Stone Campaign

Amount
(\$)

\$50.00

Payee address; City; State; Zip Code

P.O. Box 831223
San Antonio, TX 78283

Purpose of payment (See instructions regarding type of information required.)

Campaign Donation

**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

03/30/2008

Payee name

La Mexicana Cafe

Amount
(\$)

\$7.83

Payee address; City; State; Zip Code

7350 Tezel Rd.
San Antonio, TX 78250

Purpose of payment (See instructions regarding type of information required.)

F & B Meeting

**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

03/30/2008

Payee name

La Prensa

Amount
(\$)

\$300.00

Payee address; City; State; Zip Code

P.O. Box 830768
San Antonio, TX 78283

Purpose of payment (See instructions regarding type of information required.)

Newspaper advertising

**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 13/25 Report: 33/46**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

05/01/2008**5** Payee name
La Prensa

6 Payee address; City; State; Zip Code
P.O. Box 830768
San Antonio, TX 78283**7** Amount
(\$)

\$300.00**8** Purpose of payment (See instructions regarding type of information required.)
Newspaper advertising**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name
Las PinchanchasAmount
(\$)

04/19/2008

Payee address; City; State; Zip Code
450 Fredericksburg Rd
San Antonio, TX 78201

\$9.80

Purpose of payment (See instructions regarding type of information required.)

F&B - Business Meeting

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name
Las PinchanchasAmount
(\$)

05/14/2008

Payee address; City; State; Zip Code
450 Fredericksburg Rd
San Antonio, TX 78201

\$6.05

Purpose of payment (See instructions regarding type of information required.)

F&B - Business Meeting

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name
Leticia Mexican RestaurantAmount
(\$)

03/31/2008

Payee address; City; State; Zip Code
1922 N. Zarzamora
San Antonio, TX 78201

\$29.75

Purpose of payment (See instructions regarding type of information required.)

F & B Meeting

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 14/25 Report: 34/46**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001

4 Date	5 Payee name	7 Amount (\$)
06/24/2008	Little Ceasar	\$9.90
	6 Payee address; City; State; Zip Code 2002 Fredericksburg Rd. San Antonio, TX 78207	

8 Purpose of payment (See instructions regarding type of information required.)
F & B Meeting**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date	Payee name	Amount (\$)
06/27/2008	Luby's Cafeteria	\$44.28
	Payee address; City; State; Zip Code 911 N. Main San Antonio, TX 78212	

Purpose of payment (See instructions regarding type of information required.)
F & B Meeting** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date	Payee name	Amount (\$)
05/19/2008	Mama Margie's	\$14.83
	Payee address; City; State; Zip Code 9950 IH 10 W San Antonio, TX 78230	

Purpose of payment (See instructions regarding type of information required.)
F & B Meeting** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date	Payee name	Amount (\$)
06/18/2008	Mama Margie's	\$17.24
	Payee address; City; State; Zip Code 9950 IH 10 W San Antonio, TX 78230	

Purpose of payment (See instructions regarding type of information required.)
F & B Meeting** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 15/25 Report: 35/46**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

06/09/2008**5** Payee name
Mazatlan Mexican Restaurant**6** Payee address; City; State; Zip Code
6928 SW Military Dr.
San Antonio, TX 78227**7** Amount
(\$)

\$34.55**8** Purpose of payment (See instructions regarding type of information required.)

F & B Meeting

(If travel outside of Texas, complete Schedule T) ☐**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
McDonald's

03/30/2008

Payee address; City; State; Zip Code
20750 Hwy 281 N
San Antonio, TX 78258Amount
(\$)

\$21.99

Purpose of payment (See instructions regarding type of information required.)

F&B - Business Meeting

(If travel outside of Texas, complete Schedule T) ☐**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
Miller Curtain Co.

05/08/2008

Payee address; City; State; Zip Code
211 New Laredo Hwy
San Antonio, TX 78211Amount
(\$)

\$69.20

Purpose of payment (See instructions regarding type of information required.)

Office Supplies

(If travel outside of Texas, complete Schedule T) ☐**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
Miller Curtain Co.

05/14/2008

Payee address; City; State; Zip Code
211 New Laredo Hwy
San Antonio, TX 78211Amount
(\$)

\$52.98

Purpose of payment (See instructions regarding type of information required.)

Office Supplies

(If travel outside of Texas, complete Schedule T) ☐**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 16/25 Report: 36/46**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001

4 Date 03/30/2008	5 Payee name Monarch Trophy Studio 6 Payee address; City; State; Zip Code 2121 N.W. Military Dr. San Antonio, TX 78213	7 Amount (\$) \$77.94
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8 Purpose of payment (See instructions regarding type of information required.)
Trophies for Golf Fundraiser**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date 06/10/2008	Payee name N&S Enterprises Payee address; City; State; Zip Code 222 E. Houston San Antonio, TX 78205	Amount (\$) \$936.00
------------------------	--	-----------------------------

Purpose of payment (See instructions regarding type of information required.)
Campaign shirts**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date 03/30/2008	Payee name Neighbor First Alliance Payee address; City; State; Zip Code 3607 Tuscony Dr. San Antonio, TX 78219	Amount (\$) \$100.00
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Purpose of payment (See instructions regarding type of information required.)
Marketing and Promotion**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date 04/27/2008	Payee name Network for Young Artists Payee address; City; State; Zip Code P.O. Box 831328 San Antonio, TX 78283	Amount (\$) \$500.00
------------------------	---	-----------------------------

Purpose of payment (See instructions regarding type of information required.)
Entertainment & Sound Rental**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 17/25 Report: 37/46**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

06/21/2008**5** Payee name
Northwest Democrats**6** Payee address; City; State; Zip Code
P.O. Box 681911
San Antonio, TX 78268**7** Amount
(\$)

\$20.00**8** Purpose of payment (See instructions regarding type of information required.)
F & B Meeting**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name
Notheast Democrats (PAC)Amount
(\$)

04/05/2008

Payee address; City; State; Zip Code
1938 Broken Oak
San Antonio, TX 78232

\$20.00

Purpose of payment (See instructions regarding type of information required.)
F & B Meeting** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name
Office DepotAmount
(\$)

05/22/2008

Payee address; City; State; Zip Code
5601 Bandera Rd
San Antonio, TX 78238

\$162.49

Purpose of payment (See instructions regarding type of information required.)
Office supplies** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name
Office Depot #346Amount
(\$)

04/05/2008

Payee address; City; State; Zip Code
3713 Colony Dr.
San Antonio, TX 78230

\$24.86

Purpose of payment (See instructions regarding type of information required.)
Office Supplies** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 18/25 Report: 38/46**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

06/20/2008**5** Payee name
Office Depot #346**6** Payee address; City; State; Zip Code
3713 Colony Dr.
San Antonio, TX 78230**7** Amount
(\$)

\$32.43**8** Purpose of payment (See instructions regarding type of information required.)
Office Supplies**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name
PD Printing and Design

03/30/2008

Payee address; City; State; Zip Code
4536 W. Commerce
San Antonio, TX 78237Amount
(\$)

\$125.00Purpose of payment (See instructions regarding type of information required.)
Campaign Marketing**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name
Pico De Gallo Rest.

03/31/2008

Payee address; City; State; Zip Code
115 S. Leona
San Antonio, TX 78205Amount
(\$)

\$39.18Purpose of payment (See instructions regarding type of information required.)
F & B Meeting**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name
Piedras Negras Cafe

04/03/2008

Payee address; City; State; Zip Code
1312 S. Laredo
San Antonio, TX 78204Amount
(\$)

\$45.63Purpose of payment (See instructions regarding type of information required.)
F & B**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 19/25 Report: 39/46**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date**5** Payee name

Piedras Negras Cafe

7 Amount
(\$)

06/05/2008

6 Payee address; City; State; Zip Code1312 S. Laredo
San Antonio, TX 78204

\$26.38

8 Purpose of payment (See instructions regarding type of information required.)

F & B

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

Payee name

Quill Corp.

Amount
(\$)

06/03/2008

Payee address; City; State; Zip Code

P.O. Box 37600
Philadelphia, PA 19101

\$109.11

Purpose of payment (See instructions regarding type of information required.)

Office Supplies

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

Payee name

San Antonio Express News

Amount
(\$)

04/03/2008

Payee address; City; State; Zip Code

P.O. Box 2171
San Antonio, TX 78297

\$2,632.68

Purpose of payment (See instructions regarding type of information required.)

Campaign Marketing

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

Payee name

San Antonio Observer News

Amount
(\$)

04/03/2008

Payee address; City; State; Zip Code

P. O. Box 200266
San Antonio, TX 78220

\$520.00

Purpose of payment (See instructions regarding type of information required.)

Campaign Marketing

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 20/25 Report: 40/46**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

03/31/2008**5** Payee name
Shell Oil Co.**6** Payee address; City; State; Zip Code
8755 IH 10 W
San Antonio, TX 78218**7** Amount
(\$)

\$70.85**8** Purpose of payment (See instructions regarding type of information required.)
Auto Expense(If travel outside of Texas, complete Schedule T) ☐**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:Date

06/11/2008Payee name
Shields of ChristPayee address; City; State; Zip Code
25781 State Hwy 46 W
Spring Branch, TX 78070Amount
(\$)

\$150.00Purpose of payment (See instructions regarding type of information required.)
Campaign Marketing(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:Date

05/08/2008Payee name
Solo ComputersPayee address; City; State; Zip Code
1410 W. Hildebrand
San Antonio, TX 78201Amount
(\$)

\$74.88Purpose of payment (See instructions regarding type of information required.)
Office Supplies(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:Date

03/30/2008Payee name
Southside ReporterPayee address; City; State; Zip Code
2203 S Hackberry
San Antonio, TX 78210Amount
(\$)

\$398.40Purpose of payment (See instructions regarding type of information required.)
Campaign Marketing(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 21/25 Report: 41/46**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001

4 Date 06/18/2008	5 Payee name St. Luke Catholic Community 6 Payee address; City; State; Zip Code 4603 Manitou San Antonio, TX 78228	7 Amount (\$) \$66.79
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8 Purpose of payment (See instructions regarding type of information required.)
Donation**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date 06/06/2008	Payee name The 100 Club of SA Payee address; City; State; Zip Code P.O. Box 6741 San Antonio, TX 78209	Amount (\$) \$100.00
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Purpose of payment (See instructions regarding type of information required.)
Dues**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date 04/05/2008	Payee name Toudouze Market Payee address; City; State; Zip Code 800 Buena Vista San Antonio, TX 78207	Amount (\$) \$52.34
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Purpose of payment (See instructions regarding type of information required.)
F & B**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date 03/30/2008	Payee name US Postal Service Payee address; City; State; Zip Code Arsenal Station San Antonio, TX 78204-9998	Amount (\$) \$234.00
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Purpose of payment (See instructions regarding type of information required.)
Postal Stamps**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 22/25 Report: 42/46

2 FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date**5** Payee name

US Postal Service

7 Amount
(\$)

03/30/2008

6 Payee address; City; State; Zip CodeArsenal Station
San Antonio, TX 78204-9998

\$33.80

8 Purpose of payment (See instructions regarding type of information required.)

Postal Stamps

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

Payee name

US Postal Service

Amount
(\$)

06/03/2008

Payee address; City; State; Zip Code

Arsenal Station
San Antonio, TX 78204-9998

\$54.00

Purpose of payment (See instructions regarding type of information required.)

PO Box Rental

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

Payee name

US Postal Service

Amount
(\$)

06/11/2008

Payee address; City; State; Zip Code

Arsenal Station
San Antonio, TX 78204-9998

\$42.00

Purpose of payment (See instructions regarding type of information required.)

Stamps

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

Payee name

Valero Store #1030

Amount
(\$)

04/02/2008

Payee address; City; State; Zip Code

1171 Coliseum Rd.
San Antonio, TX 78219

\$72.59

Purpose of payment (See instructions regarding type of information required.)

Auto Expense

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 23/25 Report: 43/46

2 FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date**5** Payee name

VFW Post #7108

7Amount
(\$)

04/05/2008

6 Payee address; City; State; Zip Code8795 FM 1560 N
San Antonio, TX 78254

\$205.25

8 Purpose of payment (See instructions regarding type of information required.)

Meet & Greet

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name

Wachovia Bank

Amount
(\$)

06/30/2008

Payee address; City; State; Zip Code

7750 I.H. 10 West
Suite 1000
San Antonio, TX 78229

\$61.85

Purpose of payment (See instructions regarding type of information required.)

Bank Service Charges

**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name

Waits, Mark

Amount
(\$)

05/29/2008

Payee address; City; State; Zip Code

300 N. Comal
San Antonio, TX 78207

\$20.00

Purpose of payment (See instructions regarding type of information required.)

Reimbursement on election data purchase

**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name

Wal Mart

Amount
(\$)

04/03/2008

Payee address; City; State; Zip Code

1200 SE Military Dr
San Antonio, TX 78214

\$19.42

Purpose of payment (See instructions regarding type of information required.)

Food - Block Walkers

**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 24/25 Report: 44/46**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00000001

4 Date	5 Payee name	7 Amount (\$)
03/30/2008	Walker, Steve	\$75.00
	6 Payee address; City; State; Zip Code 112 Leisure Dr Balcones Heights, TX 78201	

8 Purpose of payment (See instructions regarding type of information required.)

Walker report website ad placement

(If travel outside of Texas, complete Schedule T) ☐**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

Date	Payee name	Amount (\$)
03/31/2008	Wendy's Restaurant	\$5.71
	Payee address; City; State; Zip Code 8814 Perrin-Beitel San Antonio, TX 78217	

Purpose of payment (See instructions regarding type of information required.)

F & B

(If travel outside of Texas, complete Schedule T) ☐**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:

Office sought:

Office held:

Date	Payee name	Amount (\$)
03/30/2008	Woodlake Golf Club	\$3,531.85
	Payee address; City; State; Zip Code 6500 Woodlake Pkwy. San Antonio, TX 78244	

Purpose of payment (See instructions regarding type of information required.)

Golf Fundraiser

(If travel outside of Texas, complete Schedule T) ☐**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:

Office sought:

Office held:

Date	Payee name	Amount (\$)
05/20/2008	Wurzbach Estates	\$600.00
	Payee address; City; State; Zip Code 8543 Wurzbach Rd. San Antonio, TX 78240	

Purpose of payment (See instructions regarding type of information required.)

Fundraiser Rental

(If travel outside of Texas, complete Schedule T) ☐**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:

Office sought:

Office held:

CREDITS (optional)

SCHEDULE K

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/1 Report: 46/46

2 FILER NAME Ortiz, Amadeo (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date 04/01/2008	5 Payor name Club Corp Service Center	8 Amount (\$) \$69.02
	6 Payor address; City; State; Zip Code 3030 LBJ Frwy Suite 500 Dallas, TX 78234	
	7 Reason for credit Refund on initial payment to The Plaza Club	

Date 06/19/2008	Payor name Time Warner Media	Amount (\$) \$186.05
	Payor address; City; State; Zip Code 900 Arion Pkwy. #101 San Antonio, TX 78216	
	Reason for credit Refund for a commercial that did not run	